

Name of applicant (IFirst, Last)			Social Security Number (Opttional)	
Mailing Address (number and street, city, s	tate, ZIP code			
Date of birth	Telephone number (home)		Telephone number (work)	
Present occupation			County of residence	
Have you ever volunteered for the Departm Yes No If so, in what categories interest you? (Check all to Audio / Visual and Presentation Construction / Maintenance Computers Education / Interpretation Environmental Monitoring Habitat and Wildlife Projects Historical Preservation What skills or experience do you have that Accessibility Designing Animal Rehabilitation Audio-Visual equipment use Biomonitoring Lakes, Streams, Boat Operation Carpentry Clerical / Office Machines Computer Applications Driver's License	hat apply) s	Office / Clerica Public Relation Recycling Research Stewardship Technical Assi Other Horiticulture Landscaping / Nature Study Photography Public Speakir Supervision Education and	stance Land Design ng / Presentations Public Programs	
☐ First Aid Certificate ☐ Forestry ☐ Graphic Design / Artwork ☐ Hand Power Tools ☐ Heavy Equipment Operation		 Wildlife Manag Working with F Writing / Editin Other Trade S	People g	
What would you like to gain from volunteering? What are some of your objectives? List cities or facilities in which you are seeking volunteer work:				
Please list all hobbies and interests:				
What training or formal education have you had that might help you volunteer with us?				
Please specify any physical limitations that may influence your volunteer work:				
What days are you available for volunteer work? All Monday Tuesday Wednesday Thursday Friday Saturday Sunday What time are you available for volunteer work? Morning Afternoon Evening				

(Please see reverse side)

How many hours per week do you wish to volunteer?					
If you do not want a weekly schedule, what is your preference?					
How long would you like your initial commitment to be with us?					
six months one year other other					
I would travel up to miles as part of my volunteer work.					
How did you hear about the Natural Resources Volunteer Program?					
Emergency Contact:					
CERTIFICATE OF APPLICANT					
I hereby certify that there are no misrepresentations in or falsifications of these statements and answers. I am aware that, should investigations disclose such, my application will be disqualified, my name removed from all eligible lists, and my applications for future examinations will not be accepted. I am also aware that falsification of this application or any accompanying data, may result in my dismissal from any position in State service.					
Signature of applicant	Date signed				
FOR OFFICE USE ONLY					
NOTES					
Date of interview (month, day,year)					
ACTION					
	,				